PTO/SB/08A (10-01)
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Complete if Known Substitute for form 1449A/PTO **Application Number** INFORMATION DISCLOSURE Filing Date STATEMENT BY APPLICANT First Named Inventor Art Unit (use as many sheets as necessary) **Examiner Name** of **Attorney Docket Number** Sheet

	U.S. PATENT DOCUMENTS							
Examiner Initials .		Document Number . Number - Kind Code 2 (if known	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear			
1/~	A	US- 6,019,445	01-15-1999	GADES				
	B	us 6,062 416	03-09-1998	SMILLIE				
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	D	US 00441928	07-06-2000	ADAMS				
	E	us. 0 398, 107	08-19-1997	RATCLIFF				
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	FOREIGN PATENT DOCUMENTS								
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Substitute for form 1449B/PTO INFORMATION DISCLOSURE				Complete if Known					
				Application Number					
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STATEMENT BY APPLICANT			First Named Inventor	DAYID	R.	HINDS			
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Examiner	Cite	Include na	ame of th	he author (in CAPITA	L LETTERS), title of the article (v	when approprie	ite), title		T2
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